

Date of Application	
Permit Number	

EVENT APPLICATION

Please return completed application form and paperwork to:

Community Development Office 41 City Hall Place Plattsburgh, NY 12901 Phone (518) 536-7458 OR (518)536-7509 events@cityofplattsburgh-ny.gov

All applications must be submitted 45 days in advance for events.

Applications submitted late or incomplete may not receive approval and may not be issued a permit

EVENT INFORMATION			
Applicant's Name: Contact # (day of)			
Location of Event Site – A fee may be assessed based on content of the application. Please mark all that apply:			
Plattsburgh City Beach Macdonough Monument Bandshell Trinity Park Plattsburgh City Marina Crete Civic Center Plattsburgh Recreation Facility City Park: Please List Street Solicitation (No rain date for street solicitation) City Hall Building Other Please list:			
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Type of Event:			
	Festival		
	Tournament		
	Parade		
	Run/Walk-a-thon		
	Bicycle Race/Ride		
	Music Event		
	Sidewalk Sale		
	Marina booking Family Picnic/		
	Demonstration		
	Other		
	<u></u>		
Actual Event Date(s):Time of Event:		
Set- Up Date:	Start Time		
Tear Down Date: _	End Time		
Rain date:	Annual Event YES NO		
	ermitted for Street Solicitations)		
Estimated Attendar	nce: Admission Fees:		
Event Details (Please describe the purpose of your event)			
ORGANIZER	APPLICANT INFORMATION		
Name of Organizat	ion		
Primary Contact Pe	erson:		
Mailing Address: _			
Town/City:	Province:		
Postal Code:	email:		
Daytime Phone Nu	mber: Cell:		

Alternate Contact Person:	Phone:	
Is your group a non-profit/charitable organization? YES NO		
If yes, does it have a charitable Donation #		
Social Media Contact Information		
Twitter Facebo	ook	
You tube Web	osite	
SITE PLAN		
Site Plan Attached YES NO		
A Detailed Site Plan must be included with your package. The following, should they be relevant, must be included on your Site Plan. - Location of all Tents, temporary or permanent structures - Fencing, staging, bleachers, stages, inflatables, petting zoos, etc Food/refreshment tent vendors, restrooms, refreshment tents OTHER EVENT DETAILS		
Power Required? YES NO Specifics:		
Water Required? YES NO		
Trailer Stage Required? YESNO (<i>Event of stage</i>)	Organizer responsible for pick up/return	
Portable Stage Required? YESNO If YES, what dimensions?		
Fireworks YES NO		
Sanitation Facilities YESNO Port-a-pottion	es to be arranged by organizer. Please mark on site map.	
Food Vendors/BBQ YES NO		
Animals (Petting zoo) YES NO Company	Contact information:	
Amusement Rides YES NO Contact Info	prmation:	

ALCOHOL

Alcohol at event YES NO Attach all requirements of the Municipal Alcohol Policy. Applicant is responsible for obtaining applicable Liquor License. The NYS Liquor Authority rules and regulations are available at www.sla.ny.gov/ .			
I/we have read, understand and will comply with the City of Plattsburgh			
Municipal Alcohol Policy		SIGNATURE	
ROAD CLOSURES/ PUB	LIC WORKS		
Does your event require a road	closure? YES N	0	
Road:			
	Date:	Time	
Road:	Date:	Time:	
Road:	Date:	Time:	
Other:			
NOTE: Please provide and m	ark all road closure i	nformation in your site plans.	
Barricades/Cones needed (if no	ot a road closure) YES	NO Location:	
Additional Accessible parking YES NO Location:			
PARKING			
Parking Location:			
Additional Handicap Parking YES NO Location:			

PARADE/ WALK INFORMATION		
Davida AMallia Anagonialia Anago	The	
Parade/Walk Assembly Area	Time	
Parade/Walk Dismissal Area	Time	
Route Map Attached YES NO		
Describe the Proposed Event Route of parade _		
EMERGENCY MANAGEMENT		
All Sections <u>MUST</u> be completed before an eissued.	event will be approved and an event permit	
Designated Emergency Liaison (Event day):		
Cell Number:		
Alternate Contact person :	Cell:	
Where will liaison meet Emergency Services in the event of an emergency?		
SECURITY		
The City Police Department will not provide security for events. Will your event require security? If so, please describe how you will secure the event venue:		
Name of Security Firm:	Contact #:	

Who is responsible for first aid at your event? Please identify their location on the site plan.		
TRAINING		
What training will you provide to your volunteers/staff/participants regarding emergencies?		
EVACUATION		
How will you evacuate the area in the case of an emergency/disaster? Location of exits? Evacuation Area		
TENTS/VENDORS		
Will you have tents at your event? YES NO		
Please list the sizes:		
REFRESHMENT VEHICLES REQUIREMENTS		
Use of refreshment vehicles must adhere to the below requirements. Please confirm how you are going to demonstrate compliance to these conditions.		
List of Food Vendors Attached YES NO		

FIRST AID

	e submit the following documents with your Event Aparable) are received and the event is approved an Eve		
	Detailed Site Plan		
	Detailed Route Map (parade or walk)		
	Map of Road Closures		
	NYS Liquor License/Special Occasion Permit		
	□ List of Refreshment Vehicle owners/ Mobile Food Providers (if applicable)		
	□ Municipal Alcohol Policy Paperwork		
	☐ Insurance Certificate (City of Plattsburgh listed as additional insured)		
	Application Signed		
I/We the Event organizer			
Permission is o use the sti special even Permit Issue	S GRANTED to the applicant and/or sponsoring organization reets/facilities and or parks as listed in the application for the t described. Date:	Insurance Certificate YES NO Permit Fee YES NO Report to Council Permit ISSUED	